

# Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	U NO.	DATE
FEE DETERMINATION	<i>PAH</i>	<i>67810</i>	<i>10/5/98</i>
O.I.P.E. CLASSIFIER	<i>W</i>		<i>10-6-98</i>
FORMALITY REVIEW		<i>61581</i>	<i>10-13-98</i>

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	4 1 6
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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